

MEF

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (503) 439-8778

**INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025**

FACSIMILE: (503) 439-6073

RECEIVED
CENTRAL FAX CENTER

OCT 17 2006

FACSIMILE COVER SHEET

Deliver to: K. Verbrugge, USPTO

Art Group: 2188

Facsimile No.: (571) 273-8300

Date: October 17, 2006

From: Paul A. Mendonsa, Reg. No. 42,879

Our Docket No.: 42390P11456

Number of pages 6 including this sheet.

Application No.: 09/981,620

Filing Date: 10/16/2001

Enclosed are the following documents:

Docket Due Date(s): 10/17/2006 |

- Amendment: _____ (____ pgs)
 - Appeal Brief (____ pgs)
 - Application: _____
(____ pgs) w/cover & abstract)
 - Assignment & Cover Sheet (____ pgs)
 - Certificate of Eacsimile _____
 - Continued Prosecution Application (CPA)
 - Declaration & POA (____ pgs)
 - Drawings: ____ sheets, ____ figures
 - Extension of Time: _____
 - Fee Transmittal (in duplicate)
 - IDS & PTO/SB/08 (____ pgs)
 - Other _____
 - Issue Fee Transmittal
 - Notice of Appeal
 - Petition for: _____
 - Request for Continued Examination (RCE)
 - Reply Brief (____ pgs)
 - Request & Certification Under 35 USC 122(b)(2)(B)(i)
 - Request to Rescind Previous Nonpublication Request
 - Response to Notice of Missing Parts & Formalities Letter
 - Response to Written Opinion (____ pgs)
 - Terminal Disclaimer
 - Transmittal of Publication Fee Due
 - Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Gayle
Gayle Bekish

10/17/2006

Date

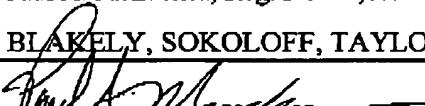
Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

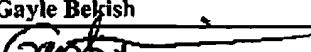
If you do not receive all the pages, or if there is any difficulty in receiving, please call: (503) 439-8778 and ask for Gayle Bekish.

RECEIVED
CENTRAL FAX CENTER

OCT 17 2006

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/981,620
		Filing Date	October 16, 2001
		First Named Inventor	Richard Coulson
		Art Unit	2188
		Examiner Name	K. Verbrugge
Total Number of Pages in This Submission	4	Attorney Docket Number	42390P11456

ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):			
		Remarks			
		SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
		Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP		
		Signature			
		Date	October 17, 2006		

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Gayle Bekish		
Signature		Date	October 17, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ndc) 10/12/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**RECEIVED
CENTRAL FAX CENTER**

OCT 17 2006

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number	09/981,620
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	October 16, 2001
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Richard Coulson
		Examiner Name	K. Verbrugge
		Art Unit	2188
		Attorney Docket No.	42390P11456

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. | <input checked="" type="checkbox"/> Credit any overpayments |

FEE CALCULATION

Large Entity		Small Entity		Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	SurchARGE - late filing fee or oath	
1052	50	2052	25	SurchARGE - late provisional filing fee or cover sheet.	
2063	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____				500.00	
SUBTOTAL (2) (\$)				500.00	

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone (503) 439-8778
Signature		Date	10/17/06	

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

BSTZ - BEAVERTON 2
RECEIVED
CENTRAL FAX CENTER

→ USPTO CENTRAL

004

OCT 17 2006

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

500.00

Complete if Known

Application Number	09/981,620
Filing Date	October 16, 2001
First Named Inventor	Richard Coulson
Examiner Name	K. Verbrugge
Art Unit	2188
Attorney Docket No.	42390P11456

METHOD OF PAYMENT (check all that apply) Check Credit card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.**FEE CALCULATION****Large Entity Small Entity**

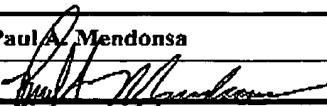
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	500.00
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	60	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) _____

SUBTOTAL (2) (\$)

500.00

Complete if applicable

Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 439-8778
Signature				Date	10/17/06

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED
CENTRAL FAX CENTER

OCT 17 2006

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 42390P11456						
<p>I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.</p> <p>Signature <u>Gayle Bekish</u> Typed or printed name <u>Gayle Bekish</u></p>		<p>In re Application of Richard Coulson</p> <table border="1"> <tr> <td>Application Number 09/981,620</td> <td>Filed 10/16/2001</td> </tr> <tr> <td colspan="2">For: MASS STORAGE CACHING PROCESSES FOR POWER REDUCTION</td> </tr> <tr> <td>Art Unit 2188</td> <td>Examiner K. Verbrugge</td> </tr> </table>	Application Number 09/981,620	Filed 10/16/2001	For: MASS STORAGE CACHING PROCESSES FOR POWER REDUCTION		Art Unit 2188	Examiner K. Verbrugge
Application Number 09/981,620	Filed 10/16/2001							
For: MASS STORAGE CACHING PROCESSES FOR POWER REDUCTION								
Art Unit 2188	Examiner K. Verbrugge							
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$500.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>								
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.</p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p><i>Paul A. Mendonsa</i> Signature</p> <p><u>Paul A. Mendonsa, Reg. No. 42,879</u> Typed or printed name</p> <p><u>10/17/06</u> Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>								

Based on PTO/SB/21 (04-05) as modified by Blakely, Salokoff, Taylor & Zafman (wrt) 11/30/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

10/18/2006 TL0111 08888853 022666 09981620

01 FC:1401 500.00 DA

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- BLACK BORDERS**
- IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- FADED TEXT OR DRAWING**
- BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- SKEWED/SLANTED IMAGES**
- COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- GRAY SCALE DOCUMENTS**
- LINES OR MARKS ON ORIGINAL DOCUMENT**
- REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.